

10/507098

**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	21050Y
First Named Inventor	Emini, Emilio A. et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF INDUCING AN ENHANCED IMMUNE RESPONSE AGAINST HIV,

(Title of the Invention)

the specification of which

☐ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/12/2003 / as United States Application Number or PCT International

Application Number PCT/US03/07511 / and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/392,581 /	06/27/2002 /	21050PV2
60/363,870 /	03/13/2002 /	21050PV

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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Customer Number
OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Anna L. Cocuzzo	42,452	Jack L. Tribble	32,633

Direct all correspondence to: ☒ Customer Number 000210

Name	Anna L. Cocuzzo		
Address	Merck & Co., Inc. - Patent Department		
Address	P.O. Box 2000, RY60-30		
City	Rahway	State	NJ
		ZIP	07065-0907
Country	USA	Telephone	(732)594-1273
		Fax	(732)594-4790

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

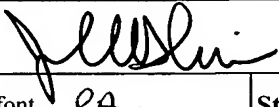


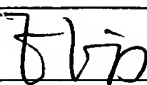
Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Emilio A.	Emini		
Inventor's Signature	<u>Emilio A. Emini</u>	Date	20 October 2003
Residence: City	Wayne PA	State	PA
		Country	USA
		Citizenship	US ✓
Post Office Address	Merck & Co., Inc., P.O. Box 2000		
City	Rahway	State	NJ
		ZIP	07065-0907

☐ Additional inventors are being named on the _____ supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
John W.		Shiver					
Inventor's Signature						Date	10/16/03
Residence: City	Chalfont PA	State	PA	Country	USA	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Michael		Chastain					
Inventor's Signature						Date	17 Oct 2003
Residence: City	Erdenheim PA	State	PA	Country	USA	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Danilo R.		Casimiro					
Inventor's Signature						Date	20-Oct-2003
Residence: City	Harleysville PA	State	PA	Country	USA	Citizenship	PH
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Tong-Ming		Fu					
Inventor's Signature						Date	20-Oct-2003
Residence: City	Ambler PA	State	PA	Country	USA	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

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ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Xiaoping				Liang			
Inventor's Signature		<i>Xiaoping Liang</i>				Date	
						Oct. 20, 2003	
Residence: City		Eagleville PA		State PA		Country USA	
						Citizenship CA ✓	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City				State		Country	
						Citizenship	
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City		Rahway		State NJ		ZIP 07065-0907	
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Inventor's Signature						Date	
Residence: City				State		Country	
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City		Rahway		State NJ		ZIP 07065-0907	
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Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City				State		Country	
						Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	